

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Theresa O'Keefe et al. Art Unit : 1643
Serial No. : 10/733,563 Examiner : David Blanchard
Filed : December 10, 2003 Conf. No. : 9540
Title : HUMANIZED ANTI-CCR2 ANTIBODIES AND METHODS OF USE
THEREFOR

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8(a)

The undersigned hereby certifies that this document is being electronically filed in accordance with § 1.6(a)(4) on the 23rd day of September, 2008.

/Laurie Butler Lawrence/
Laurie Butler Lawrence, Reg. No. 46,593

MAIL STOP PETITION
Commissioner for Patents

PETITION FOR 3 MONTH EXTENSION OF TIME

Sir:

A three (3) month extension of time, to and including July 4, 2008, is requested for response to the Final Office Action mailed January 4, 2008. A Petition to Revive under 37 C.F.R. §1.137 (b) and a Notice of Appeal are being filed with this request for extension of time.

The extension fee as set forth in 37 C.F.R. §1.17(a) is being paid concurrently herewith by the Electronic Filing System (EFS) by way of Deposit Account authorization. Please apply any other charges or credits to Deposit Account No. 50-2762, referencing attorney docket no. M2051-701219.

Respectfully submitted,
Theresa O'Keefe et al., Applicants

Adjustment date: 10/22/2008 GARIAS
09/23/2008 INTEFSW 00011802 502762 10733563
02 FC:1253 1050.00 CR

/Laurie Butler Lawrence/
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Date: September 23, 2008

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>10/17/08</u>		2 Serial/Patent # <u>10/733,563</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time		9/23/08	\$ 1,050
	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
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			7 TOTAL AMOUNT OF REFUND	\$ 1,050
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
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<i>Ext. of time fee paid after maximum extendable time period.</i>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Kimberly Inabinet</u>		TITLE: <u>Petitions Examiner</u>		
SIGNATURE: <u>Kimberly Inabinet</u>		PHONE: <u>x24618</u>		
OFFICE: <u>Office of Petitions</u>				
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